# RETIREE BENEFITS - PLAN YEAR 10/1/14 - 9/30/15 Monthly Rates

# PPO KC 200

	То	tal Monthly					
Coverage level		Cost	County	Ret	iree Pays	Α	nnual Cost
employee only	\$	699.00	\$0.00	\$	699.00	\$	8,388.00
EE+child(ren)	\$	977.00	\$0.00	\$	977.00	\$	11,724.00
EE+spouse	\$	1,441.00	\$0.00	\$	1,441.00	\$	17,292.00
family	\$	1,701.00	\$0.00	\$	1,701.00	\$	20,412.00

#### **PPO KC 1000**

	To	tal Monthly					
Coverage level	Cost		County	Retiree Pays		Annual Cost	
employee only	\$	646.00	\$0.00	\$	646.00	\$	7,752.00
EE+child(ren)	\$	902.00	\$0.00	\$	902.00	\$	10,824.00
EE+spouse	\$	1,332.00	\$0.00	\$	1,332.00	\$	15,984.00
family	\$	1,572.00	\$0.00	\$	1,572.00	\$	18,864.00

#### QHD 1300

	To	tal Monthly					
Coverage level		Cost	County	Re	etiree Pays	Α	nnual Cost
employee only	\$	506.00	\$0.00	\$	506.00	\$	6,072.00
EE+child(ren)	\$	706.00	\$0.00	\$	706.00	\$	8,472.00
EE+spouse	\$	1,041.00	\$0.00	\$	1,041.00	\$	12,492.00
family	\$	1,227.00	\$0.00	\$	1,227.00	\$	14,724.00

### **Dental High**

	То	tal Monthly					
Coverage level		Cost	County	Ret	iree Pays	Α	nnual Cost
employee only	\$	33.00	\$0.00	\$	33.00	\$	396.00
EE+child(ren)	\$	62.00	\$0.00	\$	62.00	\$	744.00
EE+spouse	\$	58.00	\$0.00	\$	58.00	\$	696.00
family	\$	104.00	\$0.00	\$	104.00	\$	1,248.00

#### **Dental Low**

	Tot	al Monthly					
Coverage level		Cost	County	Ret	iree Pays	An	nual Cost
employee only	\$	25.00	\$0.00	\$	25.00	\$	300.00
EE+child(ren)	\$	39.00	\$0.00	\$	39.00	\$	468.00
EE+spouse	\$	39.00	\$0.00	\$	39.00	\$	468.00
family	\$	69.00	\$0.00	\$	69.00	\$	828.00

# **United Healthcare - Optional Vision**

## **Retiree's Cost**

Coverage level	Monthly Cost	Annual Cost					
employee only	\$ 5.78	\$ 69.36					
EE+child(ren)	\$ 11.48	\$ 137.76					
EE+spouse	\$ 10.98	\$ 131.76					
family	\$ 17.60	\$ 211.20					

Premiums are due by the 5th of each month made payable to Treasurer of Montgomery County.